Application or Docket Number

PATENT APPL	ICATION FEE	DETERMINA	ATION RECORD
	Effective Oc	tober 1, 2001	

(Column 1) (Column 2)					SMALL ENTITY TYPE - OR			OTHER THAN SMALL ENTITY			
ТО	TAL CLAIMS	14					RATE	FEE	l I	RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE		00	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			14 minus 20= 1		•					and the same of the same	. 10.00
			· · · · · · · · · · · · · · · · · · ·	* /		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 4				inus 3 = (X42=	42	OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						+140=	:	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTAL	412	OR	TOTAL	
CLAIMS AS AMENDED - PART II									0	OTHER	THAN
(Column 1) (Column 2) (Column 3)					(Column 3)	SMALL	ENTITY	OR			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	*** .		=	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140=			+280=		
•		. *	•				TOTAL	:	OR	TOTAL	
	m,	(Oali		10.1	- 0	(0)	ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	7	HIGH	mn 2) HEST	(Column 3):	· · · · · ·	ADDI-	:	•	ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= ×	X\$ 9=		OR	X\$18=	
AME	Independent	1	Minus	***	·	= .	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					140					
				_			+140=	- <u>-</u>	OR	+280=	
,							ADDIT. FEE	4.	OR	ADDIT. FEE	\$
_	14 hyl.	(Column 1)			mn 2) HEST	(Column 3)				2	· , ,
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	BER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=	X\$ 9=	*	OR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										
* If th ntry in column 1 is less than the entry in column 2, writ "0" in column 3.								OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, nter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE											
	The "Highest Nur	nber Previously Pa	id For" (Total o	r Ind pend	dent) is the	e highest number	found in the app	propriate bo	x in co	olumn 1.	